

IN UNITED STATES	<input type="checkbox"/> MAGISTRATE	<input type="checkbox"/> DISTRICT	<input type="checkbox"/> APPEALS COURT or	<input type="checkbox"/> OTHER PANEL (Specify below)
IN THE CASE OF				
USA	Christopher Hendricks			
FOR				
AT				

LOCATION NUMBER
FBI File Number
Open Court
1103

PERSON REPRESENTED (Show your full name)	1 <input type="checkbox"/> Defendant—Adult
	2 <input type="checkbox"/> Defendant - Juvenile
	3 <input type="checkbox"/> Appellant
	4 <input type="checkbox"/> Probation Violator
	5 <input type="checkbox"/> Parole Violator
	6 <input type="checkbox"/> Habeas Petitioner
	7 <input type="checkbox"/> 2255 Petitioner
	8 <input type="checkbox"/> Material Witness
	9 <input type="checkbox"/> Other (Specify) _____
CHARGE/OFFENSE (describe if applicable & check box →)	<input type="checkbox"/> Felony
	<input type="checkbox"/> Misdemeanor

DOCKET NUMBERS
Magistrate
04-1703
District Court
Court of Appeals

EMPLOY- MENT	Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Am Self-Employed			
	Name and address of employer: UMass Hospital Lake Ave. Worcester			
	IF YES, how much do you earn per month? \$ 4000			
	IF NO, give month and year of last employment How much did you earn per month? \$ _____			
ASSETS	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	IF YES, how much does your Spouse earn per month? \$ _____			
	If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____			
	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
OTHER INCOME	RECEIVED	SOURCES		
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY THE SOURCES \$ _____	_____		
	CASH	Have you any cash on hand or money in savings or checking accounts? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No IF YES, state total amount \$ 525.00		
	PROP- ERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
OBLIGATIONS & DEBTS	IF YES, GIVE THE VALUE AND \$ DESCRIBE IT	VALUE	DESCRIPTION	
	DEPENDENTS	MARITAL STATUS	Total No. of Dependents	List persons you actually support and your relationship to them
		<input checked="" type="checkbox"/> SINGLE	_____	_____
		<input type="checkbox"/> MARRIED	_____	_____
<input type="checkbox"/> WIDOWED		_____	_____	
<input type="checkbox"/> SEPARATED OR	_____	_____		
<input type="checkbox"/> DIVORCED	_____	_____		
DEBTS & MONTHLY BILLS (LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)	APARTMENT OR HOME: Kia Financial Services Sallie Mae Services Arabella Mutual	Creditors	Total Debt	Monthly Paymt.
			\$ 250.00	\$ 250.00
			\$ 45.00	\$ 45.00
			\$ 160.00	\$ 160.00

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date)

07/01/04

SIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)

Christopher R. Hendricks